Termination/Retirement

Upon leaving employment with the State of Nebraska, it is important for you to know the following information about your benefits.

Address & Phone Number Changes

Please keep State of Nebraska informed of any changes to your address and/or phone number. State of Nebraska needs this information in order to send you a W-2 and 1095-C in January following the year in which you terminate or retire.

Medical, Dental and Vision

Medical, dental, and/or vision coverage ends on the last day of the month in which you terminate. You have the option to temporarily continue your coverage under COBRA. You will receive information regarding continuation of these benefits from the State's third-party COBRA administrator, ASI COBRA. If you require a faster enrollment process, contact Employee Wellness & Benefits at 402-471-4443.

If you have any questions about COBRA, please contact ASI COBRA at 877-388-8331.

See page 38 for COBRA/Retiree Premiums.

Early Retiree Insurance Program

This program was created for State employees who meet the qualifications and retire from employment between ages 55 to 64. Retirees age 65 or older at the time of Retirement and their spouse will only be offered 18 months of COBRA continuation.

The Early Retiree Insurance Program allows a retiree and enrolled dependents to continue coverage on the State's health, dental, vision, healthcare FSA, and EAP coverage at your own expense. The health insurance premiums include both State and active employee costs. The employee and dependent must be actively enrolled in the benefit on their last day of employment to continue coverage. Unlike COBRA, a dependent cannot continue coverage through the Early Retiree Insurance Program unless the employee/retiree is also enrolled.

When Retiree Insurance Ends

- 1. Retiree coverage ends 1st of the month in which they turn age 65.
 - Dependents will be offered to continue coverage on COBRA for 36 months or until the beginning of the month when the dependent turns age 65, whichever is sooner.
- Spouse coverage ends 1st of the month in which they turn age 65.
- 3. Coverage in the health care FSA may only be continued only through the remainder of the current plan year.
- Monthly premiums are not paid in a timely manner.
- This provision is changed in a subsequent labor contract.
- The administrative regulation, contract provision, and/ or applicable statutes are changed and continued coverage is no longer available.
- The State of Nebraska ceases to provide group health insurance to employees.

ASI COBRA administers the Early Retiree Insurance Program on behalf of the State. If you are eligible, you will receive enrollment documents from ASI COBRA upon retirement. Additional questions about the Retiree Health Insurance Program should be directed to AS-Employee Wellness & Benefits department at 402-471-4443.

Disability Retirement Insurance

An employee under age 55 may retire as a result of disability. An employee who chooses this option must first elect COBRA and once he/she is approved, the Retirement System will notify Employee Wellness & Benefits office. The individual's coverage will be converted to the Early Retiree Health plan up to the first of the month in which the employee reaches age 65.

Wellness

HealthFitness

If you plan to continue on the State's health insurance plan through COBRA or the Early Retiree Insurance Program, you may continue participating in the State's wellness program. Participants in the Wellness Health Plan will be required to complete the same wellness-related activities as active employees. Contact HealthFitness at 866-956-4285 for assistance.

Flexible Spending Accounts

ASI Flex

Health Care: If you have a balance in your Health Care Account at the time of termination, you may request reimbursement up to October 31 of the following Plan Year. You may claim expenses incurred through the end of the month of your termination date. If you have a positive balance in your FSA account, your are eligible for COBRA. Expenses incurred after your termination date are not eligible for reimbursement unless you continue your coverage through COBRA. If you choose not to elect COBRA, and you have no incurred expenses before leaving State of Nebraska, then those remaining funds are forfeited. You will receive information from ASI COBRA Services in a separate mailing regarding continuing your Health Care, if applicable. If you have questions, please call ASI Flex directly at 800-659-3035

Dependent Care Account: If you have a Dependent Care Account at the time of termination, you may be reimbursed for claims incurred through the end of the current plan year up to the balance in your dependent care account at ASI Flex. The deadline for reimbursement requests is October 31 of the following Plan Year. If you have questions regarding your Dependent Care Account, please call ASI Flex directly at 800-659-3035.

Health Savings Account (HSA)

Optum Bank

If you have a Health Savings Account, it will continue to be owned by you after leaving State of Nebraska. You can keep the account with Optum Bank and continue to use the money for qualified healthcare expenses. You may be able to make personal contributions to the account or roll over the account into a new HSA. Contact Optum Bank at 866-234-8913 for assistance.

Employee Assistance Program (EAP)

Deer Oaks

Deer Oaks offers free and confidential Work/Life benefits to you and your family up to 18 months after termination. Visit www.deeroaks.com. Company ID and Password: SON. Not all agencies offer an EAP through Deer Oaks.

Long Term Disability (LTD)

Mutual of Omaha

Your Long Term Disability policy ends on midnight the day you terminate. You may continue your long term disability coverage under a Portability Policy. A Portability Application is available on the AS-Employee Wellness & Benefits website under www.link.nebraska.gov. Please contact Mutual of Omaha at 800-877-5176 within 31 days of your termination if you would like to take advantage of the Portability Policy.

Basic & Voluntary Life

Aetna

Your life insurance benefits end on the last day of the month in which you terminate. Participants may convert a portion to a private plan. Please contact Aetna directly at 800-523-5065 within 31 days of your termination date for information on how to convert your policy. A conversion form is available on the AS-Employee Wellness & Benefits website under www.link. nebraska.gov.



Need Help?

If you require additional assistance after contacting the appropriate vendors, please contact AS-Employee Wellness & Benefits at:

Phone: 402-471-4443 or 877-721-2228

Email: as.employeebenefits@nebraska.gov

State of Nebraska wishes you luck in your future endeavors!

COBRA & Retiree Medical, Dental & Vision Premiums

The monthly premiums for your medical, dental, and vision plans for July 1, 2016 through June 30, 2017 are shown below.

Monthly Medical Premiums

		Wellness Health Plan	Regular Health Plan	Consumer Focused Health Plan
Retiree/COBRA Employee Only (Single Coverage)	Retiree:	\$552.88	\$663.08	\$377.66
	COBRA:	\$563.94	\$676.34	\$385.21
Retiree/COBRA Employee + Spouse (Two-Party Coverage)	Retiree:	\$1,465.14	\$1,757.16	\$1,000.80
	COBRA:	\$1,494.44	\$1,792.30	\$1,020.82
Retiree/COBRA Employee + Dependent Children (Four Party Coverage)	Retiree:	\$1,133.40	\$1,359.32	\$774.22
	COBRA:	\$1,156.07	\$1,386.51	\$789.70
Retiree/COBRA Employee + Spouse + Dependent Children (Family Coverage)	Retiree:	\$1,962.72	\$2,353.94	\$1,340.70
	COBRA:	\$2,001.97	\$2,401.02	\$1,367.51

Monthly Dental Plan Premiums

	Basic Option	Premium Option
COBRA/Retiree Employee Only (Single Coverage)	\$23.58	\$27.54
COBRA/Retiree Employee + Spouse (Two-Party Coverage)	\$47.21	\$55.12
COBRA/Retiree Employee + Dependent Children (Four-Party Coverage)	\$68.01	\$79.48
COBRA/Retiree Employee + Spouse + Dependent Children (Family Coverage)	\$73.89	\$86.29

Monthly Vision Plan Premiums

	Basic Option	Premium Option
COBRA/Retiree Employee Only (Single Coverage)	\$5.41	\$8.36
COBRA/Retiree Employee + Spouse (Two-Party Coverage)	\$8.67	\$13.42
COBRA/Retiree Employee + Dependent Children (Four-Party Coverage)	\$8.85	\$13.67
COBRA/Retiree Employee + Spouse + Dependent Children (Family Coverage)	\$14.24	\$22.07